

Application Data Sheet

Application Information

Application Number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?: None

Number of CD Disks::

Number of Copies of CDs::

Sequence Submission?:

Computer Readable Form (CRF)?:

Number of copies of CRF::

Title:: FLEXIBLE TENSIONER ARM WITH
MULTIPLE HINGES

Attorney Docket Number:: BW-DKT03090

Request for Early Publication?: No

Request for Non-Publication?: No

Suggested Drawing Figure::

Total Drawing Sheets:: 7

Small Entity?: No

Petition included?: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

Correspondence Information

Correspondence Customer Number:: 032175
Phone Number:: 607-256-2000
Fax Number:: 607-256-3628
E-Mail address:: tian@bpmlegal.com

Representative Information

Representative Customer Number:: 032175

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date:
	Non-provisional o		

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee name:: BorgWarner Inc.
Street of mailing address:: Powertrain Technical Center
3800 Automation Ave., Suite 100
City of mailing address:: Auburn Hills,
State or Province of mailing
address:: MI
Country of mailing address:: US
Postal or Zip Code of mailing
address:: 48326-1782

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	USA
Status::	Full Capacity
Given Name::	Jeffrey
Middle Name::	
Family Name::	Foster
Name Suffix::	
City of Residence::	Horseheads
State or Province of Residence::	NY
Country of Residence::	US
Street of mailing address::	204 Eisenhart Place
City of mailing address::	Horseheads
State or Province of mailing	
Address::	NY
Country of mailing address::	US
Postal or Zip Code of mailing	
Address::	14845

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	USA
Status::	Full Capacity
Given Name::	Mariano
Middle Name::	S.
Family Name::	Garcia
Name Suffix::	
City of Residence::	Ithaca,
State or Province of Residence::	NY
Country of Residence::	USA
Street of mailing address::	3 Stormy View Road
City of mailing address::	Ithaca
State or Province of mailing	
Address::	NY
Country of mailing address::	USA
Postal or Zip Code of mailing	
Address::	14850